

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: METHOD AND APPARATUS FOR RENDERING  
SHADOWS

Attorney Docket Number:: 21751-001710US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 25

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Thomas  
Middle Name:: David  
Family Name:: Lokovic  
Name Suffix::  
City of Residence:: Richmond  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 212 Schooner Court  
City of Mailing Address:: Richmond  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94804

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Eric  
Middle Name:: Hugh  
Family Name:: Veach  
Name Suffix::  
City of Residence:: Redwood City  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 413-F Cork Harbour Circle  
City of Mailing Address:: Redwood City  
State or Province of mailing address:: CA

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94065

**Correspondence Information**

Correspondence Customer Number:: 20350

**Representative Information**

Representative Designation::	Representative Number::	Representative Name::
Primary	38,575	Stephen Y. Pang
Associate	51,995	Daniel Mao

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a Continuation of		09/619,064	07/19/00

**Foreign Priority Information**

Country::	Application number::	Filing Date::
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**Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::